



# DORR RESEARCH FOUNDATION



THE JOINT JOURNAL • Volume 11 • December 2018

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## Hip and Knee 2018:

### *How do you pick your surgeon?*

by Lawrence D. Dorr, M.D.

**L**et me begin by thanking all of you who prayed for me while I had my spine infection. I am over it, and back taking care of my patients and operating. I am playing golf again! I thank God he gave me a disease I could get over. And a wife who was devoted to getting me well.

How do I pick my surgeon? In social situations this is the most asked question to me. The first desire of all patients is to stay near home so they are close to family and friends. For most medical care that is a good decision because ordinary medical diseases do not need highly skilled and experienced doctors. But if your disease is life threatening, like cancer, or the treatment is life changing, like joint replacement, you are smart to seek out the skilled and experienced. You will likely need to go to a destination medical center where that doctor practices rather than your local community hospital. (Remember you are seeking the doctor to treat you, not the hospital, so sometimes an expert is near home!).

I'm an expert in hip and knee replacement so I'll focus on these operations. This is nearly 2019, and the principles of these operations haven't changed in my 40 years of performing them. It is still a mechanical operation in a biological environment that requires precision in reconstructing the lost cartilage surface. But there have been evolutions in techniques with materials, scientific knowledge of how the hip joint works, and patient care. I had no participation in the discovery of the new plastics which have been so important in the longevity of these replacements but I was a pioneer in the small incisions, patient care, and the current knowledge of how the



Lawrence D. Dorr, M.D.

*Continued on Page 3*

**This is the final printed edition of The Joint Journal. Beginning in 2019, our newsletter will be available exclusively by email or on our website:**

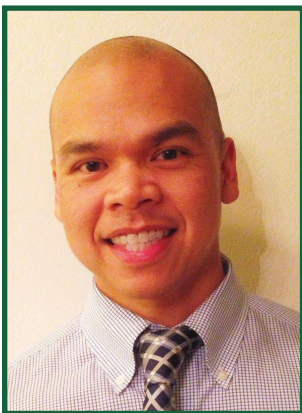
**<http://www.operationwalk.org>**



**Dr. Paul K. Gilbert**

My brother was also career Air Force and flew RF4s. I couldn't be prouder of them and all our Veterans.

With that thought, I want to introduce Roderick Mabasa. Rod is our physician's assistant at Verdugo Hills Hospital. Rod is not only a phenomenal PA, but also an extraordinary person. He is one of those team players who makes everyone around them better. PAs like José



**Roderick Mabasa, PA**

family to help protect us and keep us all safe. His family and his colleagues are proud to support him in this calling. You will read this article long after Veterans' Day, but every day we appreciate those who put themselves in harm's way for our peace and safety. Here's to our Veterans and current military.

## Here's to Veterans

I am writing this article on Veteran's Day and thinking about my dad and my brother. My father, who is 95 and lives in San Diego, flew bombers over northern Italy at the end of WWII. He turned that into a career as an Air Force officer and pilot.

Lopez and Lisa Fujimoto-Yamaguchi at Keck, and Rod at Verdugo, are critical to our expert patient care.

The connection here is that Rod is also Army Reserve. He serves not only our patients, but also our country. It is a sacrifice to take time away from work and

### Robotics

Years ago, Dr. Dorr had the vision and foresight to incorporate computers in the process of placing joint replacements in his patients. It has taken time, but now 19% of replacements are inserted with the benefit of computer accuracy and consistency. Robotics is the natural evolution of this process. With the phenomenal success of robotic partial knee replacement, we embarked on expanding this technology to total knee replacement.

This came with advancements in software and hardware. Dr. Dorr has written many times in this publication about the benefits of data in understanding and perfecting what we do. The software program associated with the robotic process is amazing in its ability to quantify and clarify the function of each knee that we operate on, each knee's own characteristics and how to build the replacement.

Joint replacement surgery is truly a marriage of science and art. It is an exciting time for us and our patients!



## How do you pick your surgeon? Continued from Page 1

spine-pelvis-hip interact as we move around during the day. So I am qualified to give you recommendations for the most highly skilled surgeons for these operations.

If my mother asked me how to choose her surgeon for hip or knee replacement this would be my answer. (Of course this is hypothetical because my dear mother is no longer alive!) First is to feel confident the surgeon will be there for you through thick or thin because if you have a complication you want someone who truly cares about you. So, does the surgeon give you contact information to readily contact him/her? Is the staff clearly concerned about you?

Is the education for the operation comprehensive (preferably a preoperative class for you)? Second, you want to be sure the surgeon is skilled at this operation so that any unexpected intraoperative problems that arise can be handled with experienced decisions. This means your surgeon should have extensive experience (thousands of cases) and/or be operating frequently – at least 100 hips or knees per year (depending on the joint you are having operated).

Young surgeons should be operating with a senior experienced surgeon until his/her volume builds to the optimal level. Today the emphasis is on personalizing the operation for each patient which means not doing the operation the same way on every patient. To do this requires that individual information is needed for each patient, and for the hip this means taking preoperative lateral stand and sit spinopelvic-hip xrays, and at surgery some form of computer navigation

should be used to precisely place the implants to function optimally for you, and last at least thirty years. Manual placement of the cup in hip replacement has a potential for 20 degrees of error, and this may cause an event such as dislocation but also increase the process of discomfort or earlier failure of the replacement.

For the knee, CT scans are becoming prevalent to provide personalized anatomy to

feed into the software of the computer used at surgery. Some computers use intra-operative registration of your anatomy and do not need CT scans. Historically there have been 25% of Total Knee patients that were not fully satisfied with their

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operation and that is because the operation has been done the same way for all. That should not be the surgeon's approach today. Postoperatively the surgeon and his staff should give you rehabilitation guidelines and keep track of you. Do not be shuttled off to a physical therapist who treats you without knowledge of your surgeon's protocols. Your surgeon's staff should be in contact with you, and you should easily be able to reach them.

I think these guidelines can be adapted for any treatment because the foundation of them is that the doctor and his staff are focused on you and your success in overcoming your disease, and are not impersonal in your care. In orthopedics the art of the profession should win the day outside the operating room; and inside the OR your surgeon should be all you expect someone will be, so that you will allow yourself to be anesthetized and operated on.



## Giving Tuesday Kicks Off the Charitable Season

**G**iving Tuesday is a global day of giving fueled by the power of social media and collaboration. Celebrated on the Tuesday following Thanksgiving, Giving Tuesday kicks off the charitable season, when many focus on their holiday and end-of-year giving.

This year Giving Tuesday was held on Tuesday, November 27. Operation Walk asked our followers on social media to be a part of our 2019 mission to Havana, Cuba by donating to fundraisers held

on Facebook and our website. We received an overwhelming response with forty-nine individuals giving on FaceBook and eight donating directly to our website. During the five day campaign, beginning on Giving Tuesday, we received \$6,520 that will help provide life changing surgeries and rehabilitation to patients who would not otherwise be able to afford hip and knee replacements.

Beyond the donations, a collective spirit of cooperation and interaction was generated. Many



volunteers not only donated but shared our campaign and our mission with friends and family. Volunteer, Camilla Ward ran her own fundraiser and matched the donations she

received. We had messages from former patients telling us how much Operation Walk means to them and how it has changed their lives. We also heard from first time donors, new followers, and old friends.

During this year's event we tripled our donations and quadrupled the responses and shares from last year and gained 25 new followers on our social media pages. Watching people from different countries, walks of life, and circumstance connect was truly rewarding and we can't wait for next year.



### Friend us on Facebook!

You can follow Operation Walk surgical missions on Facebook.



Join the conversation and become part of our online family by following us on FaceBook, Twitter, and Instagram. We can't wait to connect with you!

[www.facebook.com/OperationWalk/](http://www.facebook.com/OperationWalk/)  
[twitter.com/OPWalkLA](https://twitter.com/OPWalkLA)  
[www.instagram.com/operationwalkla/](https://www.instagram.com/operationwalkla/)



## My First Operation Walk Pre-Trip: La Havana 2018

by *Alejandra Castillo*  
*Administrative Assistant*



Working in the Operation Walk Los Angeles office is such a pleasure. I get to see day to day all the support that comes in the mail from generous people all over the country who adore Dr. Dorr, Dr. Gilbert and Operation Walk, and who love to contribute to this organization in any way they can. I also get to work alongside Jeri Ward and Mary Ellen Sieben, two nurses who are the masterminds behind every Operation Walk Los Angeles trip and who have taken the role of training other Operation Walk teams across the country. Their leadership in Operation Walk is legendary, I've met many Operation Walk volunteers who have told me so and I've read plenty of Operation Walk trip archives where their problem-solving and get-things-done spirit shines through.

Recently, I got to witness their expertise abroad for the first time. I had the opportunity to assist Jeri and Mary Ellen on a pre-trip to La Havana, Cuba in October 2018. As team leaders, it is their duty to travel to every mission site six months in advance to lay the groundwork and preparatory arrangements for the medical volunteer team to come. We departed from Los Angeles on a Tuesday night and arrived to La Havana on Wednesday morning, ready to seize the day. On Jeri's itinerary were

*Continued on Page 6*



## My First Operation Walk Pre-Trip continued from page 5

the following goals: meet with hospital staff at CIMEQ and at Hospital Ortopédico Docente Fructuoso Rodríguez, collect patient x-rays, make hotel arrangements, and find restaurants that could host large groups. Meanwhile, Mary Ellen was on a mission to tour the operating rooms at both hospitals and take note of their anesthesia equipment, sterilization equipment, as well as their patient capacity, storage capacity, electrical outlets, and hospital layout.

Jeri and Mary Ellen were received so warmly at both hospitals that you would think they were visiting family abroad! They've worked with and kept in touch with staff at CIMEQ since the first ever Operation Walk trip in 1997, and have conducted so many Operation Walk trips back to La Havana since then that they consider Cuba their second home!

I saw Mary Ellen's audacity as she toured the operating rooms at Hospital Ortopédico Docente Fructuoso Rodríguez for the first time, taking pictures and making note of their medical equipment while asking questions and problem solving their equipment needs. Hospital Ortopédico Docente Fructuoso Rodríguez is a public orthopedic and teaching hospital in La Havana where we are working on establishing a new partnership. This new partnership would mean that Operation Walk teams could operate in Cuba twice a year going forward!

Jeri is the mastermind behind all trip logistics. Always looking out for her team members, I could see Jeri's mind working ceaselessly from the moment we arrived at LAX. From navigating the airport in small groups, arranging group transportation, and selecting the best group-friendly

restaurants, Jeri was compiling all the information team members would need to know to travel as prepared as possible. Ensuring team members have all the information they need prior to a trip ensures a more efficient and successful mission and lessens the probability of unanticipated delays or mishaps.

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It was very reassuring to visit Cuba for the first time under the guidance and leadership of these two incredible women, who always have the well-being of their team members and patients in mind,

and who are wonderful at building meaningful, long-lasting relationships all over the globe. Their expertise and commitment to Operation Walk is admirable, and I have no doubt that our trip to La Havana in April 2019 will be life-changing for the patients there awaiting surgery and for first-time team members, such as myself. I'm very grateful to be a part of this wonderful organization and look forward to continue growing and learning as much as possible in years to come.



**Friend us on  
Facebook!**

You can follow Operation Walk surgical missions on Facebook.

We are  
on Twitter  
**@OPWalkLA**



## Operation Walk 2018 Gala a Huge Success

Over 300 people came together to celebrate Operation Walk's 22 years of service at our annual fundraiser. This was a very special event, as our honoree was our founder, Dr. Lawrence D. Dorr. Over \$450,000 was raised to support Operation Walk over the coming year. Friends and family, colleagues, and industry representatives gathered to pay homage to Dr. Dorr.



*Erika, Alejandra, and Mary Ellen ready to greet Gala guests.*

The evening started with a beautiful rendition of "God Bless America" by James Russell Dorr, with backup singers from USC. Next, Dr. Uri Herscher, Founding President & CEO of the Skirball Cultural Center, gave an inspirational invocation. Dr. Herscher and the Skirball Foundation were early supporters that gave Operation Walk its initial funding to get started.



*Dr. Larry and Marilyn Dorr*

The California Club, where the dinner was hosted, was beautifully transformed for the event by our Board President Carolyn L. Miller and our volunteer committee members: Julie Anderson, Ava Baldwin, Yolee Casagrande, Alejandra Castillo, Cecilia Cayton, Jennifer Desanto, Kari Heck, Theresa Murphy, Patti O' Brien, Felicia Renty, Mary Ellen Sieben, Jane Song-Gee, Ana Vasquez, and Jeri Ward.



*Entertainment was provided by violinist Karolina Protsenko, who played "Despacito" and "Hallelujah."*

Entertainment was provided by violinist Karolina Protsenko, who played "Despacito" and "Hallelujah." She received a standing ovation from the crowd. If you missed the event, you can still see her performance on YouTube. A video tribute (which can be viewed on our website: [operationwalk.org](http://operationwalk.org)) to Dr. Dorr was the highlight of the evening, encompassing the work he has done to build Operation Walk over the past 22 years.



*Karolina Protsenko with her father Nicholas and Jeri Ward.*

Guests had fun posing on the Red Carpet with Dr. Dorr and Operation Walk team members as well as other guests, many of whom look forward to seeing each other at our annual event.

Our sincere thanks go out to all who donated and participated in this event. Funds raised go toward 2019 Operation Walk costs, care for Operation Walk USA patients, and operating costs.



## ***The Dorr Arthritis Institute***

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## **Operation Walk 2018 Gala a Huge Success**

*Over \$450,000 raised to support Operation Walk over the coming year*



*The Dorr family came from across the USA (Iowa, Minnesota, Nebraska, Texas) to support Operation Walk and honor Dr. Lawrence Dorr. Full story and more Gala photos on Page 7.*

**OUR NEWSLETTER IS GOING ELECTRONIC.** If you wish to receive the next issues via email, please send your email address to Alejandra Castillo at [Alejandra@operationwalk.org](mailto:Alejandra@operationwalk.org). The newsletter can also be viewed on our webpage <http://www.operationwalk.org>.